

File with:
Iowa Ethics and Campaign
Disclosure Board
510 E 12th Ste. 1A
Des Moines, Iowa 50319
Fax: 515-281-4073

Reset Form

FOR INSTRUCTIONS, SEE BACK OF FORM
DISCLOSURE SUMMARY PAGE

IA ETHICS AND
CAMPAIGN DISCLOSURE BOARD

2008 JAN 15 PM 1:51

COMMITTEE NAME (Must be same as on Statement of Organization)

AUDUBON COUNTY DEMOCRATIC CENTRAL COMMITTEE

IMPORTANT: Indicate by # type of committee you are reporting for: 4

(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party
(4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political
Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC (11) Local Ballot Issue

CANDIDATE COMMITTEES ONLY:

Candidate Name

Political Party (if applicable)

Office Sought

District (if Senate or House)

FORM DR-2 (Rev. 07/2007)	DISCLOSURE REPORT
For Office Use Only	
Comm. # <u>9008</u>	
Logged In <u>S</u>	
Scanned	
Computer	
Audited	

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a

Mary Ann Johnson
SIGNATURE OF PERSON FILING REPORT

712-563-3925
TELEPHONE

1/15/08
DATE SIGNED

I AM FILING A JAN 1, 2007 THRU DEC 31, 2007

(report date)

REPORT FOR (1) ELECTION (2) NON-ELECTION YEAR

Indicate by # 2

☐ CHECK IF AMENDMENT TO REPORT DATED _____

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.
(You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election

County & Local Committees, enter County in
which Election is held
AUDUBON

STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)

\$ 62.79

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (**also see in-kind below)

\$ 1,350.55

Schedule F: Loans Received total (Attach Schedule F)

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL

\$ 1,413.34

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)

\$ 484.18

Schedule F: Loan Repayments total (Attach Schedule F)

CASH ON HAND at the end of this reporting period (if final report balance must be zero)

\$ 929.16

**UNPAID BILLS (From Schedule D - Attach Schedule D)

*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)

**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)

CONSULTANT BREAKDOWN (Schedule G Attached?)

YES NO

CANDIDATE COMMITTEES ONLY:

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

\$

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

Reset Form

SCHEDULE**A**

(Rev. 07/03)

**MONETARY
RECEIPTS**☐ CHECK THIS BOX IF
AMENDING FORM**COMMITTEE NAME** (Must be same as on Statement of Organization)

AUDUBON COUNTY DEMOCRATIC CENTRAL COMMITTEE

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.**NOTE:** ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.**CAUTION:** Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
4/3/07	ID# CK#	UNITEMIZED CONTRIBUTIONS		\$67.00	<input checked="" type="checkbox"/>
8/3/07	ID# CK#	POPCORN SALES AT FAIR		119.55	<input type="checkbox"/>
8/29/07	ID# CK#	ROBERT NELSON 1772 LITTLEFIELD DR EXIRA IA 50076		100.00	<input checked="" type="checkbox"/>
9/20/07	ID# CK#	UNITEMIZED CONTRIBUTIONS		240.00	<input checked="" type="checkbox"/>
9/20/07	ID# CK#	FLOYD HACKWELL PO BOX 204 EXIRA IA 50076		100.00	<input checked="" type="checkbox"/>
9/21/07	ID# CK#	GARY LARSEN 2764 FALCON AVE EXIRA IA 50076		50.00	<input checked="" type="checkbox"/>
9/26/07	ID# CK#	MILDRED MEYER 112 KNUTSEN ST EXIRA IA 50076		15.00	<input checked="" type="checkbox"/>
9/30/07	ID# CK#	UNITEMIZED CONTRIBUTIONS		594.00	<input checked="" type="checkbox"/>
10/5/07	ID# CK#	JOSIE CLARK 1000 GRANDVIEW DR AUDUBON IA 50025		25.00	<input checked="" type="checkbox"/>
10/9/07	ID# CK#	EARL BLOHM 1683 FALCON AVE AUDUBON IA 50025		25.00	<input checked="" type="checkbox"/>
SUB-TOTAL				\$ 1,335.55	
TOTAL (if last page of this schedule)				\$	

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

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(for Schedule A)

For Instructions, See Back of Form

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CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE**A**

(Rev. 07/03)

**MONETARY
RECEIPTS**☐ CHECK THIS BOX IF
AMENDING FORM**COMMITTEE NAME** (Must be same as on Statement of Organization)

AUDUBON COUNTY DEMOCRATIC CENTRAL COMMITTEE

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
10/11/07	ID# CK#	NANCY SAND 1035 220TH ST KIMBALLTON IA 51543		\$15.00	<input checked="" type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ 15.00	
TOTAL (if last page of this schedule)				\$ 1,350.55	

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

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(for Schedule A)

FOR INSTRUCTIONS, SEE BACK OF FORM

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EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)
AUDUBON COUNTY DEMOCRATIC CENTRAL COMMITTEE

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
4/19/07	ID# CK#	AUDUBON MEDIA 301 BROADWAY AUDUBON IA 50025	ADVERTISING	\$ 39.00
6/21/07	ID# CK#	PEGGY SMALLEY 612 E DIVISION AUDUBON IA 50025	CANDY FOR PARADE	11.76
6/26/07	ID# CK#	AUDUBON CO FAIR BOARD %GARY VAN AERNAM 2810 -280TH EXIRA IA 50076	FAIR BOOTH RENT	75.00
8/6/07	ID# CK#	PEGGY SMALLEY 612 E DIVISION AUDUBON IA 50025	PARADE CANDY & FAIR PRIZE	\$6.00
8/30/07	ID# CK#	POSTMASTER 418 TRACY ST AUDUBON IA 50025	STAMPS	\$2.00
9/30/07	ID# CK#	ACHS %ARCH ANDERSEN 802 BROOKSIDE AUDUBON IA 50025	RENT FOR FUNDRAISER	35.00
10/5/07	ID# CK#	FOOD PRIDE 104 MARKET ST AUDUBON IA 50025	FOOD FOR FUNDRAISER	57.42
9/30/07	ID# CK#	CONNIE BLUM 1245 DOVE AVE MANNING IA 51455	CAKE FOR FUNDRAISER	50.00
SUB-TOTAL				\$ 406.18
TOTAL (if last page of this schedule)				\$

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H Instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

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(for Schedule B)

